

UNIVERSITY OF LONDON.

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BIBLIOTHECA  
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MED. EDIN.

EXAMINATION

FOR THE DEGREE OF

DOCTOR OF MEDICINE

IN THE YEAR 1843.

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## EXAMINERS.

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*Elements of Intellectual Philosophy, Logic, and  
Moral Philosophy.*

Rev. HENRY ALFORD, M.A.

THOMAS B. BURCHAM, Esq., M.A.

*Surgery.*

JOHN BACOT, Esq.

Sir STEPHEN LOVE HAMMICK, Bart.

*Medicine.*

ARCHIBALD BILLING, M.D.

ALEXANDER TWEEDIE, M.D., F.R.S.

*Midwifery.*

EDWARD RIGBY, M.D.



# PASS EXAMINATION.

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MONDAY, November 27.—MORNING, 10 to 1.

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## ELEMENTS OF INTELLECTUAL PHILOSOPHY, LOGIC, AND MORAL PHILOSOPHY\*.

*Examiners*, Rev. H. ALFORD and Mr. BURCHAM.

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1. GIVE an account of the sensualist and idealist philosophies.

2. Criticise generally the Essay concerning Human Understanding ; its method, objects, arrangement, and style.

3. In what sense does Locke use the word ‘ Understanding ’ ? What other senses have been given to it ?

4. What are Cousin’s remarks on Locke’s procedure in examining the origin of our ideas ? State your own opinion on the proper order of our inquiries concerning Human Understanding.

5. Translate the following passage, and accompany it with a brief statement of Cousin’s arguments, of which it is a summary :

Loeke a éprouvé son système sur un certain nombre d’idées particulières, savoir : l’idée de l’espace, l’idée de l’infini, l’idée

\* The following Works have been selected for the Examination in Logic, Moral, and Intellectual Philosophy, for the Degree of DOCTOR OF MEDICINE in the year 1844 :

*Logic*.—Bacon’s *Novum Organum*, Part I.

*Philosophy of the Mind*.—Cousin’s Analysis of Locke’s Essay (being the 3rd volume of his *Cours de Philosophie*).

*Moral Philosophy*.—Butler’s *Analogy*, Part I. Stewart’s *Outlines of Moral Philosophy*.

du temps, l'idée de l'identité personnelle, l'idée de la substance, l'idée de la cause, l'idée du bien et du mal, s'imposant la loi d'expliquer toutes ces idées par la sensation et par la réflexion. Nous avons suivi Locke sur tous ces points qu'il a lui-même choisis ; et, sur tous ces points, un examen attentif nous a démontré qu'on ne peut expliquer aucune de ces idées par la sensation ou par la réflexion, qu'à la condition de méconnaître entièrement les caractères réels dont ces idées sont aujourd'hui marquées dans l'entendement de tous les hommes.

6. Give the substance of Cousin's remarks on nominalism and realism : and examine critically the assertion of Locke and his school, that the greater part of our disputes are disputes about *words*.

7. In what instances have the followers of Locke perpetuated or advanced his errors ? in what have they corrected them ?

8. Give a brief account of the purpose and proposed contents of the ' *Novum Organum*.' What place are you disposed to assign to Bacon in the history of philosophy ?

9. "As the sciences now in being are useless in the discovery of works, so is the present logic in the discovery of the sciences."—*Aphor.* 11.

Of what sciences and what logic is this said, and with what justice ?

10. Enumerate the classes of prejudices or idols described by Bacon, and give instances of them.

11. How do you answer the argument against a future state which is founded on the presumption that death is the destruction of living beings ?

12. Show that a kind of moral government is implied in God's natural government. In what sense may the notion of a moral scheme of government be said to be natural ?

13. Distinguish between instinctive and deliberate resentment. What is the final cause of the former ?

14. What idea, according to Hume, have we of cause and effect ? What are the objections made by him to the *a posteriori* argument for the existence of a Deity ?

MONDAY, November 27.—AFTERNOON, 3 to 6.

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COMMENTARY ON A CASE IN MEDICINE.  
CELSUS DE RE MEDICA.

*Examiners, Dr. BILLING and Dr. TWEEDIE.*

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CASE.

A married woman, twenty-five years of age, came under observation on the 8th of June, and gave the following account of her illness. About six months previously she felt pain in the cardiac region and vertigo, followed by loss of power in the left side of the body and loss of speech. On the following day she became insensible and remained so for about a week, but after the adoption of energetic treatment, recovered her consciousness and the power of the left side of the face, but the command over the left upper and lower extremity was much impaired. She was in this state when she applied for advice on the 8th of June, and continued without perceptible change for four weeks, when the pain in the cardiac region increased, accompanied with strong impulse of the heart, and a rough rolling murmur with the first sound. The measures pursued had the effect of diminishing the impulse of the heart so much that she unadvisedly went abroad, and exposed herself to cold. When visited a few days afterwards she exhibited the following symptoms:—the breathing was laborious, the lips livid; there was however so much consciousness that she recognised persons around her, but her articulation was indistinct and her voice feeble; the pulse became scarcely perceptible, the extremities cold, and she died in the evening.

What was the nature of her disease? What treatment would you have suggested? What appearances would you have expected to find on examination of the body after death?

## CELSUS.

Protinùs autem inter initia scire facile est, quis acutus morbus, quis longus sit ; non in his solùm in quibus semper ità se habet, sed in his quoque in quibus variat. Nam ubi sine intermissionibus accessiones et dolores graves urgent, acutus morbus est : ubi lentì dolores lentæve febres sunt, et spatia inter accessiones porriguntur, acceduntque ea signa quæ in superiore volumine exposita sunt, longum hunc futurum esse manifestum est. Videndum etiam est, morbus an increseat, an consistat, an minuatur ; quia quædam remedia inerescentibus morbis, plura inclinatis conveniunt : eaque quæ deerescentibus apta sunt, ubi acutus inerescens urget, in remissionibus potiùs experienda sunt. Inerescit autem morbus, dùm graviores dolores accessionesque veniunt, hæque et ante, quam proximæ, revertuntur, et postea desinunt. Atque in longis quoque morbis etiam tales notas non habentibus, scire licet, incrementum, si somnus incertus est, si deterior concoctio, si fœdiores dejectiones, si tardior sensus, si pigrior mens, si percurrit corpus frigus aut calor, si id magis pallet. Ea verò quæ contraria his sunt, deecedentis ejus notæ sunt. Præter hæc in acutis morbis seriùs æger alendus est, nec nisi jam inclinatis ; ut primò dempta materia impetum frangat : in longis maturiùs, ut sustinere spatium affecturi mali possit. Ac si quandò id non in toto corpore, sed in parte est, magis tamen ad rem pertinet vim totius corporis moliri, quàm per eam partes ægræ sanentur. Multùm etiam interest, ab initio quis rectè curatus sit, an perperàm ; quia curatio minùs his prodest, in quibus assiduè frustrà fuit. Si quis temerè habitus, adhuc integris viribus vivit, admotâ curatione, momento restituitur. Sed quùm ab his cœperim, quæ notas quasdam futuræ adversæ valetudinis exhibent, curationum quoque principium ab animadversione ejusdem temporis faciam. Igitur si quid ex his quæ proposita sunt, incidit, omnium optima sunt quies et abstinencia ; si quid bibendum, aqua : idque interdùm uno die fieri satis est ; interdùm, si terrentia manent biduo : proximèque abstinentiam sumendus est cibus exiguus,



bibenda aqua, postero die etiam vinum, deindè in vicem alternis diebus, modò aqua, modò vinum, donec omnis causa metûs finiatur. Per hæc enim sæpè instans gravis morbus discutitur. Plurimique falluntur, dùm se primo die protinùs sublatus languorem, aut exercitatione, aut balneo, aut coactâ dejectione, aut vomitu, aut sudationibus, aut vino sperant: non quod non interdùm id incidat, aut non decipiat, sed quod sæpiùs fallat, solâque abstinentiâ sine ullo periculo medeatur: quùm præsertim etiam pro modo terroris moderari liceat; et, si leviora indicia fuerunt, satis sit à vino tantùm abstinere, quod subtractum plus quàm si cibo quid dematur, adjuvat: si paulò graviora, facile sit non aquam tantùm bibere, sed etiam cibo carnem subtrahere: interdùm panis quoque minùs quàm pro consuetudine assumere, humidoque cibo esse contentum, et olere potissimùm: satisque sit tum ex toto à cibo, à vino, ab omni motu corporis abstinere, quùm vehementes notæ terruerunt. Neque dubium est quin vix quisquam, qui non dissimulavit, sed per hæc maturè morbo occurrit, ægrotet. —*Celsus*, Lib. III. cap. ii.

*TUESDAY, November 28.*

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MEDICINE.

*Examiners, Dr. BILLING and Dr. TWEEDIE.*

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*MORNING, 10 to 1.*

1. Describe the forms of Hypertrophy of the Heart. Give the symptoms, local and general, of each. What are the pathological effects of hypertrophy of the left ventricle?
2. Sketch the diagnostic symptoms and treatment of Inflammation of the Duodenum.
3. Detail the symptoms, varieties, and treatment of Iritis.
4. Describe the diagnostic characters and forms of Purpura, with the appropriate treatment of each.

*AFTERNOON, 3 to 6.*

1. When there is complete absence of the respiratory murmur over the whole of one side of the thorax, what inferences are to be drawn as to its pathological causes?
2. Detail the symptoms of Scarlet Fever, including a description of its several forms, and the treatment applicable to each.
3. Mention the sources from which the blood may issue in Hemoptysis.
4. Enumerate the varieties of Colic. Explain the causes, pathology, and appropriate treatment of each.

DOCTOR OF MEDICINE.—1843. PASS EXAMINATION. 11

*FRIDAY, December 1, at 10 A.M.*

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EXAMINATION ON THE ANSWERS TO THE  
PRINTED PAPERS, AND ON THE COMMEN-  
TARIES.

By Vivâ Voce Interrogation.

*Examiners, Dr. BILLING and Dr. TWEEDIE.*

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# EXAMINATION FOR HONOURS.

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*TUESDAY, December 5.*

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## SURGERY.

*Examiners, Mr. BACOT and Sir STEPHEN HAMMICK.*

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*MORNING, 10 to 1.*

How do you know when a caries of the cervical, dorsal, or lumbar vertebræ is threatened? Give the symptoms and treatment of the different stages respectively by which the disease generally proceeds, when it goes on to its utmost limit, short of death, whether it has arisen from accident or a constitutional cause: give the symptoms, appearances, and management of the various curvatures of the spine, up to a favourable or fatal issue: detail the symptoms, by which you detect the existence of a psoas and a lumbar abscess: point out the diseases with which they are occasionally confounded, from their earliest to their more advanced stages; giving the various modes of treatment which have been from time to time recommended; saying which you would prefer, with your reasons for such preference; and where the case terminates fatally, either from caries, curvature, or abscess, you will write down the state in which you expect to find the bony and soft parts, by a post-mortem examination.

*AFTERNOON, 3 to 6.*

" If called to a person about the middle age, and apparently hitherto in good health, who has been found lying in the street in a state of total insensibility, how would you detect, whether that unconseiousness has arisen, from a concussion of the brain; an extravasation of blood within the head, from violence or natural causes; a fracture of the skull; apoplexy; epilepsy; drunkenness; or poison? Detail the symptoms of each of the above states respectively, and where you think the application of the trephine is necessary, you will give the method of performing that operation; contrasting the practice of the present day, in the treatment of capillary, simple and compound fractures of the skull, with that pursued by Mr. Pott and the best surgeons of his time, with your opinion of the superiority of one over the other.

*WEDNESDAY, December 6.*

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MEDICINE.

*Examiners, Dr. BILLING and Dr. TWEEDIE.*

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*MORNING, 10 to 1.*

1. Sketch the characteristic symptoms of Asthma, including a description of its forms and complications. Mention the opinions entertained of its pathology or nature ; and give an outline of the treatment applicable to each variety of the disease.

2. Explain the principles on which the treatment of Dropsy should be conducted.

*AFTERNOON, 3 to 6.*

1. Describe the various forms of Paralysis, connecting each with its pathological cause ; sketch the indications to be kept in view in the treatment.

2. Give an outline of the treatment of continued fever, including, 1. the circumstances that require the employment of blood-letting, general or local ; 2. those which render it inexpedient ; 3. the indications for the exhibition of wine and other stimulants, with the rules to be observed in their administration.

*THURSDAY, December 7.*

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MIDWIFERY.

*Examiner, Dr. RIGBY.*

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*MORNING, 10 to 1.*

1. Describe exactly the manner in which the head presents and passes through the pelvis and external parts during labour, in the most usual form of cranial presentation.

2. Describe the different modes of treatment which have been adopted in ovarian Dropsy, and their degree of success.

*AFTERNOON, 3 to 6.*

1. Describe the different varieties of deformed pelvis, and the causes of them.

2. Enumerate the various ways by which the child can render labour difficult or dangerous by its own faulty conformation.



## CANDIDATES.

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The following Candidates passed the Examinations, and have consequently been admitted to the Degree of DOCTOR OF MEDICINE.

### *First Division.*

Medical Schools.

\*GARROD, ALFRED BARING. . . . . University College.

†HEATON, JOHN DEAKIN. . . . . University College.

SMITH, EDWARD. . . . . Queen's College, Birmingham.

WAY, WILLIAM. . . . . University College.

\* A Certificate of Special Proficiency in Medicine was awarded to Dr. Garrod.

† A Certificate of Special Proficiency in Medicine and a Gold Medal for a Commentary on a Case in Medicine were awarded to Dr. Heaton.

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## EXAMINATION FOR HONOURS.

### MEDICINE.

GARROD, ALFRED BARING. . (*Gold Medal*). . . University College.

HEATON, JOHN DEAKIN. . . . . University College.

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